Juridical Analysis of Health Financing in Government **Public Hospitals**

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Abstract

Regional government budget, regional government subsidies or other sources that are not binding in accordance with the provisions of the legislation. Other sources that are not binding as regulated in article 48 paragraph 1 of Law No. 44 of 2009 concerning Hospitals is not clearly regulated especially now that Republic of Indonesia Law Number 17 of 2023 concerning Health has been implemented which revokes the Hospital Law . Thus, it is possible for hospitals to be creative in finding sources of hospital financing with the limitation that these sources are not binding and are in accordance with statutory provisions. This study aims to find out the principles of government hospital financing, identify and analyze the hospital financing process and policies in hospital financing. This type of research is normative juridical. Data collection tools are used through library materials and related laws and regulations. The principle of hospital financing which consists of efficient, financing in Indonesia As previously explained that health financing covers various functions, namely the function of collecting funds, pooling resources and spending health financing. The following is a more complete explanation regarding the function of health financing. For example regarding the collection of funds (Revenue collection). The functions of hospital financing include efficiency, transparency and efficiency by requiring human resources and legal rules regarding hospital financing are regulated in Law Number 4 of 2018 concerning Hospitals and Patient Obligations in Article 4 paragraph 1 General information about the Hospital.

Keyword: Criminal Sanctions, Rehabilitation, Narcotics Abuse

1. INTRODUCTION

Hospital own source power which is income originating operations from public the general public uses it facility service health at hospital good private nor hospital government. Utilization facility hospital the includes: service take care road, service take care stay, service terrible emergency, service support medical, service pharmacy and others. Besides that financing hospital sourced from reception hospital as mentioned above, you can also originate from budget government, subsidies government, budget local government, subsidies regional government or other sources do not tie in accordance with provision regulation legislation. Other sources do not tie as arranged previously in article 48 paragraph 1 Republic of Indonesia Law Number 44 of 2009 concerning hospital no arranged in a way clear especially moment this has Republic of Indonesia Law Number 17 of 2023 concerning health that repealed the hospital. With That's it possible hospital for get creative in look for source financing hospital with limitation that source that no tie and in accordance with provision legislation. That government hold a number of role, government as body regulator, government as body payer, from a number of side government also as executor organizer hospital this matter can proven with providing bailout funds for close lack of BPJS health funds as big as Rp. 10.25 T4 accordingly article 48 of Law Number 40 of 2004 concerning system guarantee national social, purpose : healthy BPJS health finance, stopped and correct impact systematic JKN asset deficit, prevent improvement risk JKN reputation and emergence of a risk political for government, and prevent happen consequence law. Naturally in do effort service health need for measure or do supervision to performance power health. Survey satisfaction public done in giving service health public and in listen as well as accept need and desire public. Progress technology health, complexity service health, as well demands for provide service health for all over resident require exists synergy between technology medical and health as well as availability source power in various country.

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This condition push development knowledge economy health in three decade final and has get a wide range of places country. But in Indonesia, science economy health walk relatively stagnant. USAID through the Health Financing Activity (HFA) works the same with Center Financing and Guarantee Health (PPJK) helps Indonesian government for developing a sustainable health financing process through projects financing health in 2019-2024. USAID project identifies constraint in system financing, health in Indonesia. namely limited capacity and the number of people who understand about economy health. Encouraged by the reason, HFA project with like heart thank you thank you writers Young Health Economists (YHE), viz children supervised youth by senior health economists, who have completed 6 books economy health. One of themes discussed in book economy health the is financing health. As poured in plan strategic ministry health 2020 to 2024, financing health is foundation important in reach order system good health, that 's on finally influence achievement degrees health. This theme discuss in a way deep draft as well as application financing in health, method as well as cycle financing and designation, as well equality in service health as part from achievement financing health with focus discussion on Guarantee National Health (JKN). Related with that, so a number of necessary aspects noticed in this matter covers harmonization regulation applicable laws in field health and tourism, protection right patient, and cooperation international in development standard quality maintenance health. Body government own very role strong in give supervision and patron answer in waiter health. As a system, components body regulator is component important connected with other components. As for insurance, factory drug and facility service, equipment industry and technology health and the financial industry will become decider in system service health. Based on things the author written interested reviewing "Analysis Juridical Financing Health on Hospital General Government ".

According to B. Arief Sidharta opinion theory knowledge law (rechtstheorie) in essence general can interpreted as knowledge or discipline deep law perspective interdisciplinary and external in a way critical analyze various aspect symptom law, fine separately nor in connection overall, good in conception theoretically nor in embodiment practically, with objective for obtain more understanding good and give explanation as clear possible about material existing laws and activity juridical in fact public. Object he studied is symptom general in order law positive that includes analysis material law, method in law and criticism ideological to law in matter this is related with financing health on hospital general government.

1. Framework Theory

B. Arief Sidharta: "Theory Knowledge Law (rechtstheorie) in essence general can interpreted as knowledge or discipline deep law perspective interdisciplinary and external in a way critical analyze various aspect symptom law, fine separately nor in connection overall, good in conception theoretically or deep embodiment practically, with objective for obtain more understanding good and give explanation as clear possible about material existing laws and activity juridical in fact public. Object he studied is symptom general in order law positive that includes analysis material law, method in law and criticism ideological to law.

a) Theory protection law

According to R. La Porta in Journal of Financial Economics, form protection given law by a country own two characteristic, that is nature prevention (prohibited) and nature punishment (sanctions). Form protection the most real law or clear that is exists institutions enforcer law like courts, prosecutors, police, and institutions solution dispute outside other (non-litigation) courts. With so in line with understanding law according to Soedjono Dirdjosisworo stated that law own understanding diverse in public and wrong the only one that is the most real from understanding about law is exists institutions enforcer law. Function Law according to Satjipto Raharjo is protect interest somebody with method allocate a power to him for act in frame the interest. Allocation power this done in a way measurable, deep meaning determined breadth and its depth.

b) Theory not quite enough answer

Not quite enough answer in dictionary law can termed as liability and responsibility, term liability designate on accountability law that is not quite enough sue consequence mistakes made by subject law, meanwhile term responsibility pointing on accountability politics. Understanding theory not quite enough answer more emphasized on meaning not quite enough answered the one who was born from provision regulation legislation so that theory responsibility interpreted in meaning liability. According to Hans Kelsen in the theory about not quite enough answer law state that: "someone responsible answer in a way law on a deed certain or that he shoulder not quite enough answer law, subject means that he responsible answer on a sanctions in matter

contradictory actions.

c) Theory Financing

Understanding financing is funding involved various party that is buyers (consumers, patients), providers services (company, service health), and party third like banks and company insurance. Financing health covers payment made in a way individual for get service until financing with insurance health to employees in the company. Financing health also no only think about how the method get funding, however also how how to get the funds can allocated in a way efficient.

2. Conceptual Framework

Framework draft called also with framework theory or a review bibliography. Framework draft marked with emergence relatedness between fact and theory ., yes in form descriptive, pictorial and other. Framework draft show channel study like the problem what, the solution what (theory), and the result what. Framework conceptual can called also with map study. As for draft in writing this consists from:

- a) Juridical analysis is an investigation a event (action) for know actual situation and obtain correct meaning according to law or based on in a way law
- b) Financing health is Financing health alone is the amount of funds required provided for organize and or utilise various effort necessary health by individuals, families, groups, and public;
- c) Hospital general government is institution service organizing health service health individual in a way plenary which provides service take care stay in, take care of road, and terrible emergency you have by government.

2. RESEARCH METHODOLOGY

Study as a activity scientific follow step certain and a long process. Activity study like has alluded to on part previously done with systematic, careful, and logical, constitute a initiated activity from study a person / researcher alone for solve a phenomenon or verify a theory nor test return so that on finally find a idea, postulate, or theory. That process is series activities undertaken researcher according to procedure and the correct process as well as accurate, so the results obtained believed right, you can trustworthy, and empowered use as well as recognized by public scientific. This study nature description analysis that has objective for describe in a way detailed, systematic and comprehensive relate with problem. In this study use technique study data collection literature. Studies literature implemented through source from secondary data namely data that includes documents official books, dictionaries law results research, journals law, and comments on decision court. This study use qualitative data analysis is discuss results research described in a way comprehensive, with endeavor see the factors behind the program, culture and policy certain, like election principles, theories, norms, doctrine and articles contained in the relevant laws with problems that will discussed in this study. Data obtained on this study analyzed in a way qualitative will stated in form description systematically too, next all data is selected, processed then stated in a way descriptive so that can give solution to the problems in question are related with financing health on hospital general government.

3. RESULT AND DISCUSSION

Principle home financing sick government

According to Organization health world or world health organization (2000), financing health refers on function system related health with collection, allocation, and mobilize funds for fulfil need health society, in fact individual and collective. In system health, goals financing health is provide funding and set incentive or financing for provider services, as well ensure all individual own access to service health public in a way effective. More carry on again, WHO explains that financing health refers on how use source power finance for ensure that system health can fulfil need health everyone collective & adequate. Financing health become a very part fundamental from system health. With support financing health, system health will capable look after and financing health is base from ability system health a country for look after as well as increase welfare its inhabitants. Funds or money that has been collected used for organize service health like pay the workers health, medicine and also finance nature activities promotional and preventive. With he declared universal health coverage (UHC) then financing health moment this also aimed at give protection risk finance population which means is financing health also used for help public get service health consequence suffer a disease without must experience risk financial consequences poverty. Based on

regulations minister health Republic of Indonesia Number 4 of 2014 concerning obligation hospital and obligation on article 1 paragraph 1 that hospital is institution service organizing health service health individual in a way plenary which provides service take care stay in, take care of road, and terrible emergency.

Can concluded that financing health have two matter objective that is collect sufficient funds And give protection risk finance to resident. From the explanation about system health, which is known that system financing health is part from system health. By Because it 's inside system health national (SKN) is mentioned that financing health is a sub system in SKN. Subsystem financing health is management efforts excavation, allocation, and health spending for organize development purposeful health increase degrees health public. By because that maintenance subsystem financing health aim provide health funds in sufficient amount or enough, allocate it in a way fair and evenly, take advantage of it in a way effective and efficient as well as can channel it for ensure implementation development health. Health development have objective important of them is availability service equitable health and convenience access (equitable access to health care) as well service quality health (assured quality). This matter can materialized if a country have financing strong, stable health and sustainable. Principles financing health based on System National Health (SKN) is as following:

a. Adequacy

Government, regional government, society, and private have not quite enough answer together in financing health. Government allocate funds through preparation budget income and shopping center and large area in accordance with provision regulation legislation. Besides for maintenance health, govt center and area must provide financing health for public poor and no capable. Sources originating financing from government, society and private keep going dug and collected as well as improved quantity to be available enough in accordance need and of course must managed with good for fulfil principle effective, efficient, fair and evenly and its management nature transparent and accountable for ensure sufficient for the amount can in accordance.

b. Effective and efficient

For ensure health fund management in a way effective and efficient so its use must in accordance with planning financing health, strengthening capacity management planning budget and competence giver service health.

c. Fair and transparent

Management of collected health funds from various sources (government, regional government, community and private) must used in a way fair to all over public so that health public maintained and public protected from fulfillment need base health. Management of health funds must also be done implemented based on regulation applicable laws, regulations manage good governance, transparent and all over its use can accountable. As for function financing health including:

- 1. Fundraising is extracting sourced funds from government / regional government is carried out through tax general, tax specifically, help or loans that don't binding, as well various source other in accordance with provision regulation applicable legislation. Fundraising gone wrong one function from financing focused health to who will pay effort health, kind payment and who will gather the financing.
- 2. Risk pooling / collection risk refers on the collection and management of financial resources so that large and unpredictable individual financial risks become predictable and distributed among all members of the group.
- 3. Spending is various provision related how payment done to service health that has been give service health. Spending health related with group which one will get benefits, in form service what / benefits provided, who will organize service health, how? mechanism payment as well as price financing service purchased health.

Home financing process sick general government

Cost health is the necessary amount of funds prepared in organize and or utilise service health for fulfil need individual, family, group, and public. Cost health shared become two perspective based on opinion Azwar that perspective provider service health and perspective user service. From perspective provider service health, costs health is a number money is a must prepared in organize service health. Service health can be implemented by party government and private. The funds prepared by provider service health

form cost investment (investment costs) and cost operational (operational costs), these funds used for organize effort health. From perspective user services, costs health is amount of funds required prepared when use service health. The amount of funds used by user service service health originate from pocket personal individual (out of pocket). Cost health own diverse type and allocation. This matter customized with type and complexity service health benefits. By general, there are two type cost health namely: costs service medical and cost service health public. Cost service medical are the funds spent for treatment and recovery health patient, meanwhile in cost service health public needed in organize service health public. This cost aim prevent disease, maintenance, and increase health public.

Collection, provision, and spending finance used for financing of Community Health Enterprises (UKM) and Health Enterprises Individual (UKP). This matter done with mobilize funds from society, government, and public-private mix. Financing for public poor generally covered by government, meanwhile financing for public capable sourced from public that alone through mechanism guarantee health, good in a way must nor volunteer. Cost health considered good if fulfil four components: first, cost health available in sufficient amount and public can utilise service health with easy. Second, the distribution of funds must be in accordance with need. Third, the use of funds must be arranged in a way thoroughly. Fourth, management cost health please increase effectiveness and efficiency. However, implementation in the field no so. Contradictory problems still often happen, from the remaining amount of funds limited, distribution or inadequate allocation of funds appropriate, inappropriate use of funds appropriate, management of funds has not been implemented, up to cost continued health increase. According to opinion Azwar, on problem financing can overcome with increase amount of funds, as well repair fund allocation, fund management, and control cost health. Problem improvement cost health influenced by various factors, such as level inflation, level request, progress knowledge and technology, change pattern disease, change pattern service health, change pattern connection doctor with patient, mechanism control weak costs, and abuse insurance health.

System health need source power finance for reach targeted goals. Cost main part big system service health absorbed by need cost source power humans, home care sick, and provision drugs. In part big country tropical, service funded health by expenditure government, private (dominated out of pocket), and help external. Financing service health in the country income low and intermediate become significant challenge. Lots country income intermediate to top throughout Latin America, Africa, and Asia has been capable provide protection health for part big from the population. Mechanism financing used expected capable ensure access to service health and protect individual from disaster debt when access service health. According to Azwar, in fact general source cost health grouped become two, viz first, all over financing sourced from budget government. Countries that use this model provide cost health for public completely. Service health given by government in a way for free. No there is mix hand from service health private. Second, in part financing covered by public. A number of country invite role as well as public for follow share in service health, good in maintenance effort health nor utilization service health. On condition in this case, the private sector is also joining in role in provision service health so that public use service health with spend your own funds.

How much role, government as body regulator, government as body payer, from a number of side government also as executor organizer hospital matter this can proven with providing bailout funds for close lack of BPJS Health funds as big as Rp. 10.25 T4 accordingly article 48 of the SJSN5 Law, for : health BPJS health finance, stopped and correct impact systematic JKN asset deficit, prevent improvement risk JKN reputation and emergence risk political for government, and prevent happen consequence law. Body government own very role strong in give supervision and patron answer in waiter health. As a system, components body regulator is component important connected with other components. As for Insurance, factory drug and facility service, equipment industry and technology health and the financial industry will become decider in system service health.

Policy home financing sick general government

Health is a important components for determine welfare public in a country. The state has an interest in ensuring that all inhabitant his country healthy (health for all). That matter need institutional for going to Universal Health Coverage (UHC). UHC is a system health with everyone inside public own fair access and evenly to service health, good service promotive, preventive, curative, and quality rehabilitation in accordance with need and cost can reachable. System financing proper health is wrong one supporter achieving UHC. UHC has two element main, i.e access service fair health and quality and protection risk

financial. System financing health in UHC you can shared become three category, ie payment single (single payer), payment double (two-tier/dual health care system), and system mandate insurance. Financing health really no can ignored. If no done with right, the can impact to sector industry and sector economy. One of for example, during the Bill Clinton administration, United States once experience wandered off in calculation financing health in financing health really no can ignored. If no done with right, the can impact to sector industry and sector economy. Based on regulation minister health republic of Indonesia number 4 of 2018 concerning hospital and obligation patient on article 4 paragraph 1 information general about hospital as dome mean in article 3 letter a which includes as following:

- a. Licensing status, classification accreditation hospital
- b. Type and facility service hospital
- c. Number, qualifications, and timetable practice power health
- d. Code of conduct and the rules that apply at hospital
- e. Right and obligation patient
- f. Mechanism complaint
- g. Financing

One of for example, during the Bill Clinton administration, United States once experience wandered off in calculation financing health in efforts to realize *health care reform*. At that time, the united states government attempted to make improvements to the high health costs which had an impact on the decline of the industrial world. The car industry in America cannot compete with Japan because the price per unit can be twice as expensive as Japan's. Thus, health is not only a citizen's right, but also an investment that determines a country's economic growth. Financing in Indonesia as has explained previously that financing health covering various function ie function fundraising, unification resource as well as spending financing health. Following explanation more complete related function financing the health. For example about collection of funds (*Revenue collection*). Fundraising is method how system health obtain financing well sourced from house stairs, business nor source power from outside country (Gottret George, 2006). In SKN, collecting funds is interpreted as fund mining is the process of extracting targeted funds for development sourced health from government / regional government is carried out through tax general, tax specifically, help or loans that don't binding, as well various source other in accordance with provision regulation applicable legislation (Republic of Indonesia, 2012).

Fundraising gone wrong one function from financing focused health to who will pay effort health, kind payment and who will gather the financing. In this context, the government can operate various mechanism good financial and non-financial for can operate this function. Issue fiscal related collection of health funds is how mobilize source power financial for can finance service health public nor individual without need burdensome financing public or until cause loan outside excessive country, collecting funds online fair and efficient as well as in accordance with level provisions national not international. *World Bank* and *The International Monetary Fund* (IMF) created criteria related Collection of health funds namely:

- 1. Strong and stable: financing collected in junglah enough, stable and tend for increase
- 2. Efficient: financing need minimize disturbance to stability economy
- 3. Equity: financing collected in a way fair on sharea group level income
- 4. Easy collected: financing easy for collected and processed
- 5. Can accepted in a way political: necessary exists transparency, wide diffusion and clarity about use financing

Mechanism collection financing health explained by Elias Mossialos, et al in his book *Funding healthcare*: options for Europe. He explain that Collection of health funds can examined from source financing, mechanisms collection and body collection of health funds. In terms of health policy at the state level, the seven functions of health financing above are useful for, firstly, collecting funds that can raise adequate and sustainable income in a fair and efficient manner. This is done by providing individuals with a basic package of essential services and financial protection against financial disasters that occur when individuals become ill. Second, risk pooling to manage pooled revenues and pool health risks fairly and efficiently. Third, purchasing can ensure efficient purchasing of health services, both allocation and technical. In a health system, the goal of health financing is to provide funding and establish incentives or financing for service providers, as well as ensuring all individuals have access to effective public health services. Health financing is a very basic part of the health system. With the support of health financing, the health system will be able to maintain and improve health and welfare man. On conditionwhich very extreme,

unavailability funding healthwill complicate health services, treatment, implementation program, prevention, and promotion health. Financing no only simply produce funding, but country able to monitor and evaluate financing for the system health using various indicators. Financing health not only discuss method increase funds service health, but also covers allocation fundingwhich there is.

Source financing health a country can originate fromgovernment and non-government that will be used collectively widely used to finance health efforts. However, often happen competition allocation funding in a system. Method allocation funds no only influenced by method service, but also priority setting in health economics law. In affordable health financing provide source power and incentive for implementation health system. In addition, health financing becomes decider main performance system health in matter equality, efficiency, and *outcomes* health. Following a number of type model financing health which can adopted by several countries:

- Financing in a way direct (direct payments by patients)
 Every individual emit cost in a way direct based onlevel use service health which accepted. Model financing this can push use service health in a way more be careful. This condition give birth to competition between provider service health in interesting attention consumer (free market). Although this may seem healthy, transaction health become no balanced. Consumer no able to understand well the health needs and any health problems they have. Everything is controlled by provider service health. This matter can give rise to inefficiency and usage therapy in a way
- 2. Payment by user (*user payments*)

 Patient pay service health in a way direct, good to the government and private sector. Quantity and mechanism payment has been formally arranged by the service provider health and government. In more complex conditions, magnitude cost every visit can different in accordance with service service health which given (for example for service health in facility private). Size cost perepisode when sick nature still or *flat rate*.
- 3. Payment by user (*user payments*)

 Patient pay service health in a way direct, good to the government and private sector. Quantity and mechanism payment has been formally arranged by the service provider health and government. In more complex conditions, magnitude cost every visit can different in accordance with service service health which given (for example for service health in facility private). Size cost perepisode when sick nature still or *flat rate*.
- 4. Financing based savings (saving-based) expenditures cost health individual based on level its use. Individual obtain help in collecting funds in the form of savings. When needed, the individual can use these funds. This model can cover the costs of primary and secondary health services, but individuals will experience difficulty financing chronic and complex services. Therefore, other financing models are needed to support this model in covering complex health costs and a wider population.
- 5. Informal financing

excessive.

- This model does not regulate the amount, type and mechanism of payment. The amount of the fee is adjusted to the agreement between the provider and user of a health service. In general, the provision of health services is more dominant in the settings. Apart from money, goods can be used as a medium of exchange to obtain health services, for example from health care providers or traditional healers. This model is usually adopted by developing countries that do not yet have a health system capable of protecting the entire population.
- 6. Based financing
 In this model, individuals do not pay for health services directly, but there is a transfer of one person's risk of illness to group risk. In addition, there is a fair distribution of cost risks. Health service costs are adjusted according to calculations and will be borne from funds that have been collected together. Individuals pay premiums using a payment mechanism regulated by the insurance fund management organization.

4. CONCLUSION

1. Principle about financing hospital government among them that is exists adequacy, effective and efficiency, fairness and transparent as well as own a number of function about about financing

- hospital as well as can concluded that financing health have two matter objective that is collect sufficient funds and give protection risk finance to population, system health, which is known that system financing health is part from system health.
- 2. System health need source power finance for reach targeted goals. Cost main part big system service health absorbed by need cost source power humans, home care sick, and provision drugs. In part big country tropical, service health financed by expenditure government
- 3. Financing health become decider main performance system health in matter equity, efficiency, and health outcomes. Financing no only simply produce funding, but rather country capable monitor and evaluate financing for system health with use various indicator. Financing health no only discuss method increase service funding health, but rather also covers allocation existing funding

REFRENCE

Azwar, A. 1996. Introduction administration health, health systems. Edition Third . Jakarta: PT Binarupa Script

Beni Satria, Redyanto Sidi . 2024. Management Completion Dispute Medical at Home Sick Via Service Unit Complaints. West Java: CV. Edupedia Publisher, ISBN: 978-623-8643-13-4

Darmawi, Herman. 2016. Management Insurance. Jakarta: Earth Script

FKM UI. Analysis Cost And Implementation Rates House Pain, Training Planning And Budgeting Health Integrated, Jakarta, 1997.

Hans Kelsen (a), 2007, as translated by Somardi, General Theory of law and State, Theory General Law and Country, Basics Knowledge Law Normative As Knowledge Law Descriptive Empirik, BEE Media Indonesia, Jakarta

Hansen & Mowen, Management Cost, Edition Indonesian, Books Two, Edition First . Jakarta: Salemba Empa, 2005

Indra Bastian, Accounting Health, Jakarta, Publisher Erlangga, 2008

Jejen Musfah . Writing Tips Work Scientific , 2005 . Jakarta: Kencana

Mahendradhata, Y., Trisnantoro, L., Listyadewi, S., Soewondo, P., Marthias, T., Harimurti, P., and Prawira, J. (2017). The Republic of Indonesia Health System Review . Health Systems in Transition Vol. 7 No. 1 2017.

Muri Yusuf, Method Study Quantitative, Qualitative & Research Combine. 2017. Jakarta: Kencana

Rafael La Porta, " Investor Protection and Corporate Governance ; Journal of Financial Economics", No. 58, October, 1999

Raymond, Tubagus. Deep Cost Approach Count Cost Per Home Service Pain, Analysis Workshop Cost Service House Sick For Planning System Financing House Pain, Center Management Service UGM Medical Faculty Health, Yogyakarta, 2001

Republic of Indonesia Law Number 17 of 2023 concerning Health

Republic of Indonesia Law Number 40 of 2004 concerning System Guarantee National Social

Republic of Indonesia Law Number 44 of 2009 concerning hospital

Riwayadi, Accounting Cost Approach Traditional And Contemporary, Salemba Empat, Jakarta, 2014

Sajipto Raharjo, Science Law, Citra Aditya Bakti, Bandung, 2006

Soekanto, Soerjono And Mamudji, Sri. 2009. Research Law. Normative: A Overview Short. Jakarta: Rajawali Press

Tengku Keizerina Devi Azwar, Redyanto Sidi, Bambang Fitrianto Regulations And Protection Law to Medical Tourism Patients in Indonesia: Challenges And Opportunity. JIIP (Journal Scientific Knowledge Education) (eISSN: 2614-8854) Volume 6, Number 9, September 2023 (7175-7182

Thabrany, Hasbullah. 1999. Determination Rates House Pain, Journal Management And Administration House Indonesian Hospital, Postgraduate Program University of Indonesia Number 1 Volume 1, Jakarta